20-6-09-19-0M-00099M37

FEC FORM 1

STATEMENT, OF **ORGANIZATION**

			2016 SEP 1 20m Bitus 20m) 2		
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5		
BSFT CAMP	A GN				
<u> </u>	<u> </u>				
ADDRESS (number and street)	15509 W. WILL	V.DSO.R			
(Check if address is changed)					
is onangedy	CHICAGO		TU [60630]- STATE A ZIP CODE A		
COMMITTEE'S E-MAIL ADDRI	ESS		,		
(Check if address is changed)	IBSFT.CAMPAIGNGGMAIL.COM				
**	Optional Second E-Mail Add	•			
COMMITTEE'S WEB PAGE AL	ODRESS (URL)		•		
(Check if address is changed)	BERNLESUR	PLARTIERS FOR	RTRUMP, ORGILII		
		•			
2. DATE 0.9 1	4 20.16				
3. FEC IDENTIFICATION N	NUMBER ► CIO	0.6,1.9.8.3.3			
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)			
I certify that I have examined	this Statement and to the best	of my knowledge and belief	it is true, correct and complete.		
Type or Print Name of Treasur	OF AMBER AC	DARCEDO			
Signature of Treasurer	HUMPY	man	Date 0.9 14 20.16		
NOTE: Submission of false, error	neous, or incomplete information in		g this Statement to the penalties of 52 U.S.C. §30109. O WITHIN 10 DAYS.		
Office Use Only		For further information Federal Election Commis Toll Free 800-424-9530 Local 202-694-1100	PPL. PLJKWI I		

Local 202-694-1100

	F	EC Fo	rm 1 (Revised 02/2009) Page 2					
5.	TYPE	OF C	OMMITTEE					
	Cano	Candidate Committee:						
	(a)		This committee is a principal campaign committee. (Complete the candidate information below.)					
	(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)					
	Name Candid							
	Candid Party	date Affiliatio	Office State State Sought: House Senate President District					
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.							
	Name Candi							
	Party	/ Con	nmittee:					
	(d)		(National, State (Democratic, This committee is a republican, etc.) Party.					
	Politi	Ical A	ction Committee (PAC):					
	(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:					
			Corporation Corporation w/o Capital Stock Labor Organization					
			Membership Organization Trade Association Cooperative					
			In addition, this committee is a Lobbyist/Registrant PAC.					
	(f)	X	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)					
		,	In addition, this committee is a Lobbyist/Registrant PAC.					
			In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)					
	Joint	Fund	Iralsing Representative:					
	(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.					
	(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.					
		Com	mittees Participating in Joint Fundraiser					
		1.	FEC ID number					
		2.	FEC ID number					
٠.		3.	FEC ID number					
	ar. c	4.	FEC ID number					

L							
L							
	Mailing Address						
			CITY	, ,		STATE	
	Relationship: Connec	ed Organization Affiliate	ed Committ	tee Joir	nt Fundraisin	g Representat	
7.	books and records.	entify by name, address (p	LADO			·	
	Title or Position		CITY			STATE	
	TREASURE	? -		Te	elephone nui	mber 1 <u>7.7</u>	
8.	Treasurer: List the name and address (phone number — optional) of the treasurer of the committee; any designated agent (e.g., assistant treasurer).						
	Full Name of Treasurer.	er ARARGE	3 DO		<u> </u>		
	Mailing Address	15509, W. D	LIND	SOR			

FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

Mailing Address

Title or Position

ZIP CODE

17731-12201-179031

STATE

Telephone number

CITY

STATE

ZIP CODE

Mailing Address

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NW, Woshurthe D

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Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received.				
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Received from House Records & Registration Office	Date of Receipt			
Received from Senate Public Records Office	Date of Receipt			
Received from Electronic Filing Office	Date of Receipt			
Other (Specify):	eceipt or Postmarked			
8W	9/19/16			
PREPARER (3/2015)	DATE PREPARED			